

## SCOUT APPLICATION FOR SUMMER CAMP AND PERIOD CHECKED BELOW

Scout \_\_\_\_\_ Rank \_\_\_\_\_ Troop No. \_\_\_\_\_

Address \_\_\_\_\_ P. O. Zone No. \_\_\_\_\_ Phone No. \_\_\_\_\_

CAMPS	PERIODS							
	1st	2nd	3rd	4th				
CAMP BEARD					<b>NOTE :</b>  It is understood units register for Owasippe or Kiwanis, not for a particular camp. Reasonable notice will be given should a transfer of sites be necessary. The Camp reserves the right to switch Troops from one Camp to another.			
CAMP BLACKHAWK								
CAMP STUART								
CAMP WEST								
WILDERNESS CAMP								
HIAWATHA BEACH								
WHITE RIVER CAMP								
CAMP PIONEER								
CAMP KIWANIS	1	2	3	4	5	6	7	8

F. 23 (5M 5-49 LD)

(PARENTS—READ REVERSE SIDE)

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F. 23 (5M 5-49 LD)

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## CONDITIONS OF CAMP ATTENDANCE

### HEALTH AND MEDICAL CARE

Every Scout MUST have a health examination within a period of THREE DAYS prior to leaving for camp. The health of the campers is protected by the medical staff of the camps. Minor ailments are cared for in the Camp Health Lodge without extra cost. If, in the judgment of the camp, it is desirable to send a boy to a nearby hospital for diagnosis or treatment, the camp reserves the right to send him there, the parents or guardian assuming full responsibility, including payment of costs. Whenever it is possible to do so, parents will be notified before such action is taken. This precaution is taken as an additional measure for the protection and health of campers.

### FEES AND REFUNDS

THE RESERVATION FEE WILL NOT BE REFUNDED. Since a place is reserved for every applicant, and the camp management makes preparation on this basis. REFUND OF BOARD FEES CANNOT BE MADE unless notice is given in writing at least one month in advance of the beginning of period reserved. Nor shall a rebate be made for unused portion of transportation. All refund requests must be made in writing to the Camping Committee of the Chicago Council.

The Camping Committee reserves the right to adjust the camp fees in case of some unforeseen condition, although it is not anticipated that this will be necessary.

### PARENT'S APPROVAL

The undersigned approves this application with the conditions stated above and on the reverse side.

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Signature of Parent or Guardian

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Summer Address

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Home Phone

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## RESERVATION

Troop N \_\_\_\_\_

We will have \_\_\_\_\_ boys and \_\_\_\_\_ Leader (s) going, too.

Number of children to Family Camp

Scoutmaster  
or Leader \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_